

Minutes of Meeting
Health Services Council
Project Review Committee-I

DATE: 14 September 2010

TIME: 2:30 PM

LOCATION: Conference Room C
Department of Administration

ATTENDANCE:

Name	Present	Absent	Excused
Committee-I			
Victoria Almeida, Esq. (Chair)	X		
John X. Donahue	X		
John W. Flynn	X		
Wallace Gernt	X		
Theresa Jeremiah			X
Amy Lapierre			X
Steven Lonardo	X		
Thomas M. Madden, Esq.			X
Robert Ricci		X	
Robert Whiteside		X	
Committee-II			
Catherine E. Graziano, RN, PhD	X		
Reverend David Shire (Secretary)	X		

Staff: Valentina Adamova, MBA, Michael K. Dexter, MPA, Joseph G. Miller, Esq., Michael Varadian, JD, MBA

Public: (Attached)

1. Call to Order, Approval of Minutes, Conflict of Interest Forms and Extension for the Minutes Availability

The meeting was called to order at 2:35 PM. The Chair noted that conflict of interest forms are available to any member who may have a conflict. A motion was made, seconded and passed by a vote of five in favor with none opposed (5-0) that the availability of minutes for this meeting be extended beyond the time frame as provided for under the Open Meetings Act. Those members voting in favor were: Almeida, Donahue, Flynn, Gernt, Lonardo.

Ms. Almeida and Rev. Shire noted the passing of former Chairman, Dr. Quigley, and requested a moment of silence in his memory.

2. General Order of Business

The first item on the agenda was the application of **Butler Hospital** for a Certificate of Need to construct a 2-story addition to house an updated patient assessment service and to accommodate an increase in licensed bed capacity by 26 beds. Staff reviewed the information mailed and handed out.

Mr. Zimmerman, President of Spectrum Research and consultant to the Department, made a presentation “Need for Increased Mental Health Inpatient Hospital Capacity in Rhode Island”. He stated that based on his analysis, his conclusions are that:

- The proposed bed increase is consistent with the use of other mental health services in Rhode Island.
- Utilization of inpatient services have gone up more slowly than other mental health services.
- The proposed increase is consistent with the national inpatient mental health use trends using the HCUP data that cover about 70% of the hospitals.
- The proposed bed increase is consistent with the national mental hospital utilization rates based on the national hospital discharge survey data.
- The proposed bed increase also leaves room for increases in the number of psych beds in general hospitals should that be necessary.

He also noted that if the hospital diversion programs are effective then this may end up satisfying some of the excess demand that are projected. With regards to the patient assessment services, Mr. Zimmerman noted that the numbers of psych patients using all modalities of treatments have been increasing over time. Secondly, based on national studies, estimates are that 25% of the people with mental illness receive care that is not therapeutic and not even indicated for their condition. This indicates that patient assessment would be an important addition to quality of care. And finally, national co-morbidity survey pointed out that only half of the patients that are receiving treatment for mental illness have disorders that met the diagnostic criteria. He noted that there are patients receiving treatment who badly need some patient assessment services to find out if they really need those services or if something else is more appropriate.

Mr. Gernt raised the issue of the impact of Obama Care on the utilization of psych services. The applicant noted that demand for services will increase across all level of services as more people are insured.

Mr. Lonardo offered a resource to the Committee to address the system and continuum of care in the form of Beacon Health Strategies, LLC. It was noted that Beacon Health Strategies, LLC does utilization review for Blue Cross and Neighborhood health plans. The applicant raised concerns regarding potential further delays to this review. Mr. Donahue noted that new information was recently received including letter from STARR. He stated that Committee is looking to make a rational decision.

Mr. Lonardo asked that the applicant quantify the incremental increase in operating expenses associated with the utilization of the 20-bed variance.

Mr. Gernt requested that a representative from Department of Behavioral Healthcare, Developmental Disabilities and Hospitals be invited to address the Committee.

Mr. Flynn noted four issues raised in the 25 January 2010 letter from MHRH and asked the applicant as to whether they would agree to such conditions. The applicant stated that they agree in principle. Mr. Flynn noted that there is a need for a state health plan.

Mr. Donahue requested that charity care information submitted by Butler Hospital be prepared for the Committee.

A motion was made by Mr. Gernt, seconded by Mr. Donahue and passed by a vote of five in favor and none opposed (5-0) to permit Beacon Health Strategies to make a presentation. Those members voting in favor included: Almeida, Donahue, Flynn, Gernt, Lonardo.

Public comments in opposition to the proposal were heard from Richard J. Goldberg, MD, MS, Psychiatrist-in-Chief for Rhode Island Hospital and The Miriam Hospital. In his comments Dr. Goldberg noted that “we should say that now is the time to stop adding beds and instead we should be investing in the support for community based service”.

Public comments in support of the proposal, with conditions of provision of services to uninsured and underinsured, were heard from Gary Bubly, MD, FACEP, Associate Director, Department of Emergency Medicine, The Miriam Hospital.

There being no further business, the meeting was adjourned at 4:27 PM.

Respectfully submitted,

Valentina D. Adamova, MBA
Health Economics Specialist